



STATE OF NEW YORK
DEPARTMENT OF HEALTH
P.O. Box 11729
Albany, NY 12211

Notice of Decision

Decision Date: October 15, 2015

NY State of Health Number: [REDACTED]
Appeal Identification Number: AP000000004565

[REDACTED]

Dear [REDACTED],

On September 9, 2015 you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's September 3, 2015 enrollment confirmation notice.

The enclosed Decision, rendered after that hearing, is issued by the Appeals Unit of NY State of Health.

If you have questions about your Decision, you can contact us by:

- Calling the Customer Service Center at 1-855-355-5777
- Sending Mail to:
NY State of Health Appeals
P.O. Box 11729
Albany, NY 12211
- Sending a Fax to 1-855-900-5557

When contacting NY State of Health about your appeal and/or the Decision, please refer to the Appeal Identification Number at the top of this notice.

Legal Authority

We are sending you this notice in accordance with Code of Federal Regulation 45 CFR § 155.545(b).

If you need this information in a language other than English or you need assistance reading this notice, we can help you. Call 1-855-355-5777 (TTY - English: 1-800-662-1220) (TTY - Spanish: 1-877-662-4886).

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NY State of Health Number: [REDACTED]
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Issues

The issue presented for review by the Appeals Unit of NY State of Health is:

Did the Marketplace properly determine that your enrollment in a Medicaid Managed Care Plan should be effective October 1, 2015?

Procedural History

On July 16, 2015, a renewal notice was issued re-enrolling you automatically into Healthfirst a Medicaid Managed Care plan with a start date of September 1, 2015. The notice further stated you were no longer eligible for Medicaid because your household income of \$27,725.00 is above the allowable income limit based on federal and state data sources. The notice explained that your coverage would continue until November 30, 2015.

On July 17, 2015, the Marketplace issued an enrollment confirmation notice stating you were automatically enrolled in Healthfirst plan coverage effective March 1, 2015.

On September 1, 2015, the Marketplace issued a disenrollment notice after receiving your request to end your coverage through Healthfirst, effective September 30, 2015.

On September 1, 2015, the Marketplace issued an enrollment confirmation notice that stated your enrollment in HealthPlus, an Amerigroup Company would begin October 1, 2015.

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On September 1, 2015, you spoke to the Marketplace's Account Review Unit and appealed the enrollment confirmation notice insofar as it began your coverage under HealthPlus effective October 1, 2015.

On September 4, 2015, your request for an expedited hearing due to an urgent medical need was granted based upon documentation you uploaded from your physician on September 2, 2015.

On September 9, 2015, you had a telephone hearing with a Hearing Officer from the NY State of Health Appeals Unit. Under oath, you authorized [REDACTED] to assist you on your behalf during the hearing. Your authorized representative waived formal notice of at least fifteen days due to the finding of good cause for an expedited appeal. The record was developed during the hearing and closed at the end of the hearing.

Findings of Fact

- 1) On July 2, 2015, you were found no longer eligible for Medicaid based on the information contained in your Marketplace account from federal and state data sources. The eligibility determination stated that your present Medicaid coverage would continue until November 30, 2015.
- 2) On July 16, 2015, you were automatically re-enrolled through Healthfirst effective March 1, 2015.
- 3) The record reflects and your authorized representative's testimony supports that you requested disenrollment from Healthfirst on September 1, 2015 and enrolled in HealthPlus.
- 4) On September 1, 2015, the Marketplace issued a notice advising you that your Medicaid coverage through HealthPlus Managed Care plan would take effect on October 1, 2015.
- 5) Your authorized representative testified that you requested through the Marketplace that your HealthPlus enrollment be backdated in order for it to take effect on September 1, 2015 and not October 1, 2015. This request was made because the current specialist whom you are seeing for emergency ongoing treatment only accepts HealthPlus.

Conflicting evidence, if any, was considered and found to be less credible than the evidence noted above.

Applicable Law and Regulations

Medicaid Managed Care Enrollment Dates

Medicaid Managed Care (MMC) plan enrollments received on or before the fifteenth day of the month are effective the first day of the following month. Enrollments received after the fifteenth day of the month are effective the first day of the second following month (Medicaid Managed Care Model Contract (Appendix H-6(b)(ii) & (iii), effective 3/1/2014 – 2/28/2019; see, §1115 Soc. Sec. Act; N.Y. Soc. Serv. Law §364-j(1)(c); 18 NYCRR 360-10.3(h)).

Legal Analysis

The issue is whether the Marketplace properly determined that your enrollment in your Medicaid Managed Care plan through HealthPlus was effective October 1, 2015.

The date on which a Medicaid Managed Care plan can take effect depends on the day a person selects the plan for enrollment.

A plan that is selected between the first day and fifteenth day of a month goes into effect on the first day of the following month.

A plan that is selected between the sixteenth day of the month and the end of the month goes into effect on the first day of the second following month.

On September 1, 2015, you selected your Medicaid Managed Care plan through HealthPlus, so it must take effect on the first day of the following month that is, on October 1, 2015.

Therefore, the September 1, 2015 enrollment confirmation notice stating that your Medicaid Managed Care coverage would take effect on October 1, 2015 is correct and must be AFFIRMED.

Decision

The September 1, 2015 enrollment confirmation notice is AFFIRMED.

Effective Date of this Decision: October 15, 2015

How this Decision Affects Your Eligibility

This decision does not change your eligibility.

The effective date of your Medicaid Managed Care plan through HealthPlus is October 1, 2015.

If You Disagree with this Decision (Appeal Rights)

This Decision is final unless you submit an appeal request to U.S. Department of Health and Human Services or bring a lawsuit under New York Civil Practice Law and Rules, Article 78.

You may bring a lawsuit on any Appeals Unit decision in New York State court in accordance with Article 78 of the New York Civil Practice Law and Rules. This must be done within four months after the date of the Decision Date, which appears on the first page of this Decision.

Additionally, Appeals Unit decisions on issues involving eligibility for qualified health plans, advance premium tax credits, and cost-sharing reductions may be appealed to the U.S. Department of Health and Human Services. This must be done within 30 days of the date of the Decision Date, which appears on the first page of this Decision (45 CFR § 155.520(c)).

If you wish to be represented by an attorney in bringing an outside appeal and do not know how to go about getting one, you may contact legal resources available to you. You may, for example, contact the local County Bar Association, Legal Aid, or Legal Services.

If You Have Questions about this Decision (Customer Service Resources):

You can contact us in any of the following ways:

- By calling the Customer Service Center at 1-855-355-5777
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Summary

The September 1, 2015 enrollment confirmation notice is AFFIRMED.

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This decision does not change your eligibility.

The effective date of your Medicaid Managed Care plan through HealthPlus is October 1, 2015.

Legal Authority

We are sending you this notice in accordance with Code of Federal Regulation 45 CFR § 155.545(a).

A Copy of this Decision Has Been Provided To:

